

stupendous sum of five hundred thousand dollars a year!

These services are often accepted by the citizens who are inmates of the institution, with gratitude for the comfort that restoration of health or saving of life means, even though many are unaware that the attending staff members donate their services.

It may be said also that the lay press of Los Angeles County has given and gives or makes little or no comment on this tremendous donation. By contrast, any donation for charitable and philanthropic purposes amounting to five hundred dollars and up, as a rule can find place for such publicity in the newspapers. If any single, or a group of lay citizens, gave fifty thousand dollars and up to the city for charitable purposes, the lay press without question would give very much publicity to the generous thought of these lay fellows. But the medical profession in Los Angeles County, through its colleagues on the attending staff, in that one single institution alone give something like five hundred thousand dollars worth of services, and hardly receives a "thank you." For year after year can be remembered when no such thanks were given, and when no particular mention or money valuation of services, was made in the reports that again and again were not even printed, because the rich county of Los Angeles was presumably too poor to spend money for the publication and distribution of a report of what the county hospital doctors were doing! Is it any wonder that many of the laity look upon doctors as somewhat peculiar individuals?

In other hospitals, and in clinics for ambulatory patients, and in a big majority of the offices of ethical physicians in private practice throughout this great state of California, gratuitous services along similar lines are constantly being given.

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With such facts covering a long period of years, staring our authorities and lay citizens and organizations squarely in the face, it is surely no improper contention, that medical men who give so much gratuitous service in such generous measure might well be left off the follow-up solicitation and other lists, of those from whom money donations for general charities could be properly expected.

But what is the practice, and what is apt to happen?

When the time for a community chest campaign rolls around, the names of most of the ethical physicians of a community are distributed among the transient lay solicitors (who are doing their bit for charity) and who make the rounds of office buildings to secure donations for the chest.

Now there is no thought in these lines to in any way criticize the good intentions or the good results of a community chest organization and drive, because all who have had experience with administrative work in charitable and philanthropic projects know how necessary it is to keep down to a minimum the wastage of funds and efforts that comes from overlapping, or from haphazard, spasmodic altruistic endeavors. Community chests are splendid institutions, and should be supported, but the contention can surely be made that in seeking for

charities the necessary money support, the names of most physicians should be omitted from the solicitation lists. Chest managers can very easily obtain the names of attending staffs of hospitals, clinics and so on, to find out who among them were particularly giving generous thought and care to the poor who are sick and injured, and physicians who do their full share of practice for the poor should feel free to so state to chest and other charity solicitors.

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This whole subject of charity money donation, in addition to service donation, is one that is intimately connected with medical economics. Physicians do themselves an injustice when they do not analyze the economic and social service factors that are involved, in order to properly outline for themselves a proper mode of action. As stated at the outset, the lines here written are not intended to keep any physician who so desires from giving money donations to charitable and philanthropic organizations and institutions, and particularly would not absolve that comparatively few of our number who are blessed with more than average financial means from doing their part, but for that very large number of practitioners who do their work from day to day in efficient fashion, and who, without blare of trumpets, donate a goodly portion of their best thought and energy to alleviate the suffering of unfortunate citizens, for such these words are written, in the hope of helping to protect them from well-meaning but not quite fair or equitable requests.

If the services we generously give to the unfortunate poor, are worthy services, then both we and the recipients should respect them. If we ourselves do not respect these services, we may rest assured, the remainder of the world will not. We will properly respect these services when we kindly and modestly but firmly acquaint the world in regard thereto. The world, in the last analysis means to be just and decently appreciative. If we give our lay citizens a proper opportunity to know of our own work, these lay citizens will of themselves conclude that we should not be asked to do more than our fair share.

A PUBLIC HEALTH INSTITUTE

Under the name "Public Health Institute" the county of Los Angeles recently had a first experience with a course of lectures on public health topics. By contrast, San Francisco, an older community from the standpoint of American civilization, has been for many years somewhat more fortunate, because for years its medical schools and its academy have brought notable medical men from other parts of our country and from abroad to give presentations of viewpoints on public health and medical problems, to both physicians and laymen.

At Los Angeles the effort referred to was made possibly largely through the Los Angeles County Health Department, its county health officer, Dr. J. L. Pomeroy, taking the initiative in the matter. The Public Health Institute was most fortunate in being able to induce so prominent an international authority on public health matters as Professo-

C. E. A. Winslow, Lauder Professor of Public Health at Yale Medical School, to come to the Pacific Coast and take its practical leadership. The scope of the institute's work was outlined in the June number of this Journal, pages 818-819.

The folio of press clippings from the Los Angeles city papers, on the topics discussed in the lectures made a most commendable showing. News items, editorials and cartoons, all entered into the newspaper presentation of what was taking place in the county hall building. It was the kind of publicity medical men often talk about as being necessary, if the laity is to be given a proper understanding of health topics, but which is so rarely realized.

It would have been difficult to have found a speaker better fitted to give a broader orientation of public health problems than Professor Winslow of Yale. His long record of achievement in the United States Public Health Association, in special works where he has been called in as an expert, and his broad knowledge, scholarly attitude and gracious personality, from his opening talk, endeared him to the audiences in both the technical and the lay courses. His work entitles him to a return engagement to California, and at some future time it is to be hoped the California Medical Association will avail itself of his presence and viewpoints.

In our county and state medical associations we talk much of educating the public into a proper understanding of public health problems and their solution, but often permit our efforts to die with this expression of intent. It is extremely difficult to present some public health matters without getting into the domain of clinical or curative medicine. In our time, a discussion of curative medicine has, and often still means a basis for sectarian controversy on matters of healing, in which the ethical medical profession not infrequently seems to come out second best, because it refuses to resort to undignified methods of publicity. It required, therefore, forethought and considerable astuteness to carry through a series of lectures on public health matters without doing as much damage as good.

This Los Angeles Institute is mentioned editorially, primarily to call the attention of county medical societies in California to the institute's aims and accomplishments, so that in other communities, members of the medical profession who are interested might perhaps be tempted to bring about a better education of the lay portion of the community, on health matters that are of mutual interest to physicians and laity.

Nowadays, with all the blatant exploitation of cultism in its variegated forms, there is need of the ethical medical profession visualizing the psychological atmosphere of the people who make up our communities and state. If we can create such a proper visualization for ourselves and will then proceed to act, there need be little doubt that the great mass of lay citizens will be most happy to give to properly trained physicians and surgeons a full meed of recognition, praise and support in all sane health measures intended to bring about an improvement in community health. If we do not make such a proper visualization for ourselves, and do

our part, then we may rest assured that the laity will misunderstand and misinterpret us and our motives, and will be very prone to listen to and believe that faddists and misguided individuals who talk about so absurd a straw man as the "A. M. A. Trust," for instance, are speaking the truth instead of uttering a mass of ridiculous nonsense and lies.

Public health work is with us and is surging forward in amazing manner. Physicians have given it much of the foundation through their researches and their cooperation; and as pioneers and as co-workers, have given a vast amount of aid in all efforts to prevent disease, and to create environments conducive to good health and prolongation of life. We must not permit the honor that is ours by virtue of our past work, to be taken from us; and particularly we must not permit the leadership in this work which we have earned, and which logically belongs to our profession, to be taken from us by lay executives and others, who, many of them, until they began to draw down salaries for such work, knew little or nothing concerning it.

The ethical medical profession ever has been, and still is loyal to the traditions of service in the fields of both clinical and public health medicine. If its members are wise, they will keep up their interest in both important fields, and through an efficiency superior to that which can be acquired by those of lesser knowledge and training, will maintain their leadership, to the benefit of individual patients and to communities as well.

SHOULD PUBLIC HEALTH BOARDS BE COMPOSED OF LAYMEN OR OF PHYSICIANS?

The physician who officiates as a public health officer must deal with disease from a somewhat different standpoint than that of the private physician. The private physician is called in by a citizen who requests professional care, and who hopes for or expects cure of this, that or the other disease which is interfering with his, the citizen's, usefulness or comfort. The public health physician, on the other hand, has his work assigned to him by many physicians, usually a community, acting through its executive officials.

While the work of the private physician deals largely with his individual patients, the work of the public health officer physician has particularly to do with the general health interests of all citizens in his district, and deals especially with sanitary engineering, bacteriologic, epidemiologic and social service activities.

When a community's population runs into the thousands and thousands, such a public health officer physician finds it convenient to have an advisory board with which he can consult on matters of fundamental policy in his department. He is, as a matter of fact, a sort of an executive with a cabinet, only the cabinet members are usually not of his own choosing. Such health boards or cabinets, came into existence in the beginning, because public health officials and the communities alike felt that on certain matters in which the interests of citizens at large were apt to be affected, it would not be a